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PTO/SB/21 (08-03)

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TRANSMITTAL FORM

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		Application Number	10/040,538
		Filing Date	December 28, 2001
		First Named Inventor	Stephen D. Pacetti
		Group Art Unit	1762
		Examiner Name	Jennifer K. Michener
Total Number of Pages in This Submission (excluding references)	2	Attorney Docket Number	50623.149

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Response to Restriction Requirement (1 page) <input type="checkbox"/> Amendment Transmittal Letter (in duplicate) <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (month) (in duplicate) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and References <input checked="" type="checkbox"/> Express Mail Label No. EV 337 973 674 US <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) In/Formal ____ Sheets with Submission of Drawings Transmittal <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan Reg. No. 44,826
Signature	
Date	March 24, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail # EV 337 973 674 US in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: March 24, 2004

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Stephen D. Pacetti et al.

Examiner: Jennifer K. Michener

Serial No.: 10/040,538 Art Unit: 1762

Filed: December 28, 2001

Title: A System And Method For Coating Implantable Devices

Commissioner for Patents
USPTO
PO Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Dear Examiner Michener:

In response to the Restriction Requirement mailed on March 4, 2004, Applicants elect Group I, Claims 1-7 and 9-26. This election is being made without traverse.

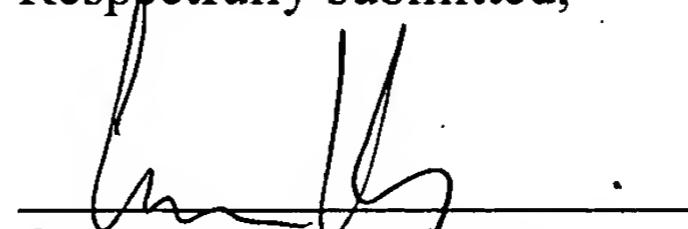
The undersigned authorizes any fees that may be required, or credit of any overpayment to be made to Deposit Account No. 07-1850.

Should the Examiner have any questions regarding this communication, the Examiner is invited to contact the undersigned at the telephone number shown below.

Date: March 24, 2004

Squire, Sanders & Dempsey LLP
One Maritime Plaza, Suite 300
San Francisco, CA 94111-3492
Telephone: 415.954.0349

Respectfully submitted,


Cameron K. Kerrigan
Reg. No. 44,826
Attorney for Applicant